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**FACSIMILE COVER SHEET****OFFICIAL**DATE: January 23, 2004OUR REF.: ORA5003USANP(J&JO-104US)

TIME: \_\_\_\_\_

YOUR REF.: 10/601,259

TO:	U.S. Patent and Trademark Office
COMPANY:	
FROM:	Robert L. Andersen <i>RLA</i>
FAX TELEPHONE:	703-872-9306
OFFICE TELEPHONE:	
TITLE OF DOCUMENT:	Communication w/encls (POA and Corresp. Address Change & Statement Under 37 CFR 3.73(b))

Total Number of Pages: 5 (including this form)

COMMENTS

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PTO/SB/21 (08-03) (AW 10/2003)

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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	10/601,259
	Filing Date	June 20, 2003
	First Named Inventor	James R. Lawler
	Art Unit	1815
	Examiner Name	
Total Number of Pages in This Submission 4.		Attorney Docket No. ORA5003USANP(J&JO-104US)

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ENCLOSURES (Check all that apply)		
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SIGNATURE OF APPLICANT, ATTORNEY OR AGENT			
Firm or Individual	Robert L. Andersen	Registration No. (Attorney/Agent)	25,771
Signature	<i>Robert L. Andersen</i>		
Date	January 23, 2004		

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ORA5003USANP(J&JO-104US)

PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Appln. No: 10/601,259  
Applicant: James R. Lawter  
Filed: June 20, 2003  
Title: RAPID RELEASE TETRACYCLINE FORMULATIONS FOR  
TREATING OR PREVENTING MUCOSITIS  
TC/A.U.: 1615  
Examiner:

**COMMUNICATION**

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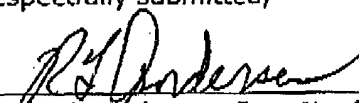
Sir :

Attached is an executed Power of Attorney and Correspondence Address  
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Robert L. Andersen  
RatnerPrestia  
P.O. Box 980  
Valley Forge, PA 19482-0980

Phone: 610-407-0700  
Fax: 610-407-0701

Respectfully submitted,

  
Robert L. Andersen, Reg. No. 25,771  
Attorney for Applicant

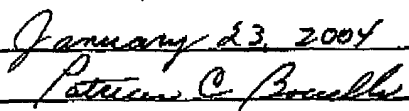
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PTO/SB/81 (09-03) (AW 10/2003)

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INDICATION FORM**

Application Number	10/601,259
Filing Date	June 20, 2003
First Named Inventor	James Ronald Lawler
Title	RAPID RELEASE TETRACYCLINE FORMULATIONS FOR TREATING OR PREVENTING MUCOSITIS
Art Unit	
Examiner Name	
Attorney Docket Number	ORA5003USANP(J&JO-104US)

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I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	Timothy E. Tracy		
Signature	[Signature]		
Date	5/21/04	Telephone	732-524-6586

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.

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ORA5003USANP (J&amp;JO-104US)

PTO/SB/88 (04-03) (AW 08/03)

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**STATEMENT UNDER 37 CFR 3.73(b)**Applicant/Patent Owner: OraPharma, Inc.Application No./Patent No.: 10/601,259Filed/Issue Date: June 20, 2003Entitled: RAPID RELEASE TETRACYCLINE FORMULATIONS FOR TREATING OR PREVENTING MUCOSITIS

states that it is:

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- 2 ☐ an assignee of less than the entire right, title and interest.  
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OR

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The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

1/21/04  
Date

732-524-6586

Telephone Number

Timothy E. Tracy

Typed or printed name

[Signature]  
Signature

Assistant Secretary

Title

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